Effective October 1, 2000							
CLAIMS AS FILED - PART I (Column 1) (Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SHALL ENTITY		
TOTAL CLAIMS	138		RA	TE FEE] [RATE	FEE
FOR	MAKEER FILED	HUMBER OF	PA BASE	FEE 355.00) (SA	MSIC FEE	710.00
TOTAL CHARGEABLE CLAIMS	138 minus 20=	. 118	xs	۰-	OR	X\$18=	2126
PROEPENDENT CLAIMS	minus 3 -	14	X4	0=	OR)(B0=	1120
MULTIPLE OEPENDENT CLAIM PRESENT				S=	OR	+270=	
* If the difference in column 1 is	less than zero, ente	r "O" in column	2 10	TAL	OA	TOTAL	395U
Cotumn 1) (Cotumn 2) (Cotumn 3)				ALL ENTITY		OTHER SMALL	THAN
CAMES REMADING AFTER AMENDMENT Total	HELD NUM PRIEV	REST CRER PRES COUSLY DOT	e4 [ADDI- TIE TIONA FEE		RATE	ADDI- TIONAL FEE
Total . 128	Minus \	38 -	/ xs	9-	OR	X\$16-	
thdependent • 17	Minus	17 -		0=	OR	X80=	
FIRST PRESENTATION OF	MATTPLE DEPENDEN	TCLAIM		5- /	OR	+270=	7
BEST AVAILABLE COPY				STAL	OR	TOTAL ADOIT FEE	
24105 (Column 1)		umn 2) (Cotu		. res			100
CCAINS REMARKING AFTER AMENDMEN Total Total Total	PRE	MEST PRE MOUSLY EX	SENT RA	ADDI	L	HATE	
Total - 138	Minus 1	38 -1	х	9=	OR	X318=	
IIS Involution 1. 1. 1.	Minus. •••	17 -	X X	0=	OR	XB0=	
FERST PRESENTATION OF	MULTIPLE DEPENDE	IT CLASM	₩,	35.	OR	+270=	
	:	•		OTAL .	OR	ADDIT, FEE	
8-9-05) (Col	umn 2) (Coh	mn 3)_	. 7 44			N. 40 .
CLUBS REMANDIO AFTER AMENOMEN	FIX NO. PRE	MESY MBER PRE	SEIT THA RA	ADDI TIONA FEE	L.	RATE	. ADDI- TIONAL FEE
Total - 138		38 •-	×	9=	OR	X\$18=	7
Total • 138	Minus	12 -		10-	OR	X80-	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				350	OR	+270=	
If the entry is column 1 is less than the entry in column 2, write 'U' in column 3.				OUL	OR	YOTAL	
"If the "Highest Number Previously Paid For" IN THES SPACE is less than 20, " ADOIT, FEE							
The Higher Names Previous Page For Trade of Hospital State of Hosp							

PATENT APPLICATION FEE DETERMINATION RECORD

tolki sio-tie

Application or Docket Number